Application for
RECORDS DISPOSITION STANDARD

1. Application Date	INSTRUCTIONS: See separate instructions for completion of front and reverse of this form. Sign original and two copies and forward to Department of Archives and History, Attention: Records Management Officer.	FOR RECORDS MANAGEMENT DIVISION USE

FOR RECORDS MANAGEMENT DIVISION USE

Date Received	Application No.	Date Completed
SEP 1 4 1976	76-303	SEP 2 4 1976

| 2. Agency Application No. | | |

3. AGENCY, Division, Subdivision & Administering Office Address

Office of Comptroller General
Agents License Division
132 State Capitol
Atlanta, Georgia

4. Person to Contact

Charles Smith

5. Working Title	6. Tel. No.
Clerk II	2100

7. ACTION REQUESTED

[X] ESTABLISH DISPOSITION STANDARD; RECORD WILL CONTINUE TO ACCUMULATE.

[ ] DISPOSE OF PRESENT ACCUMULATION; NO FURTHER ACCUMULATION ANTICIPATED.

8. Earliest & Latest Dates of Series	9. Exact Series Title
1975 to date	Insurance File Agents License Renewal Form (Duplicate Copy)

10. What is the function of the office in which this record series is created?

Issuing new agents licenses, renewing permanent licenses, processing applications for these licenses. Examining agents, conducting pre-hearing conferences and holding formal hearings on offending agents, preparing certificates for agents being licensed as non-residents in other states.

11. This file contains the following documents (include form numbers and titles, if any, and file arrangement).

Documents relating to: Renewing of insurance agents' licenses.
Included is a duplicate copy of form GID-101, agents license renewal form.
File is arranged alphabetically by agent.

ATTACH SAMPLES OF THE FILE

12. EQUIPMENT OCCUPIED	No. of Drawers	Cu. Ft. of Records		No. of Drawers	Cu. Ft. of Records
Letter-size File Drawers			ANNUAL RATE OF ACCUMULATION		10
Legal-size File Drawers			Floor Space Occupied (Square Feet)	In Office(s) / In Storage Area(s)	10
Shelf space		10			

	This Year's	Last Year's	Preceding Year's	All Prior Years'
AVERAGE DAILY REFERENCES	20	0	0	0

QUESTIONNAIRE Place an "x" in the proper column. If answer is "YES," please explain	YES	NO
13. Is this the Record Copy of the series? Record Copy is maintained in Insurance Agents Files.	[ ]	[X]
14. Is there a duplication of this series in another office or agency?	[ ]	[X]
15. Is the information contained in this series ever summarized or published? Attach copy of summary or publication.	[ ]	[X]
16. Does the series contain classified information requiring security handling?	[ ]	[X]
17. Does the series initiate, amend or terminate agency policies and procedures?	[ ]	[X]
18. Could the function be performed if the files were lost or destroyed?	[X]	[ ]
19. Is the series (or major portion of it) regularly microfilmed? If yes, why?	[ ]	[X]
20. Does the record series provide data as input to an EDP file?	[ ]	[X]
21. Does the record series contain documentation produced as EDP printout?	[X]	[ ]
22. Has the Federal Government issued instructions governing the retention/disposition of these files?	[ ]	[X]
23. Will there be a need for these records 10, 15 years from now? If yes, what?	[ ]	[X]

24. REQUIREMENTS. The following requires the files to be kept ___1___ **XXXXXX** month

a.[ ]STATE   b.[ ]STATUTE OF   c.[ ]AUDIT   d.[ ]FEDERAL   e.[XX]ADMINISTRATIVE   f.[ ]HISTORICAL
    LAW   LIMITATION   PERIOD   LAW   DECISION   VALUE
             (Cite Law, Statute, or other reason for the retention requirement)

25. AGENCY RECOMMENDATIONS. This agency recommends that the file series be cut off at the end
of each -[ ]CALENDAR YEAR -[ ]FISCAL YEAR -[X]OTHER _____ ,then:

[ ] Hold in the current files area _____ month(s)/_____ year(s):
[ ] Transfer to [ ] State Records Center [ ] Local Holding Area; hold _____ year(s):
[ ] Destroy.
[ ] Transfer to State Archives for permanent retention.
[ ] Destroy immediately after cut-off.
[XX] Other: (Specify)
    **Upon receipt of current printout, transfer to inactive file, hold in current
    files area 1 month; then destroy.**

(Indicate briefly rationale for recommendations above/or write additional remarks):

Records Management Officer (Signature)	Date	OTHER REQUIRED SIGNATURES	DATE
Fred Anders MB	9-13-76		
26. Recommendations in paragraph 25 are:	Agency Head/Designee [X] Approved [ ] Disapproved	*Wm R. McBern*	9-13-76
	State Auditor/Designee [X] Approved [ ] Disapproved		9-22-76
STATE RECORDS COMMITTEE	Secretary of State/Designee [X] Approved [ ] Disapproved	*Carroll Hart*	9-20-76
	Attorney General/Designee [X] Approved [ ] Disapproved	*RH Shell*	9-22-76